

COMMUNICATING CARDIOVASCULAR RISK IN TYPE 2 DIABETES

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Background

Metabolic control in type 2 diabetes (T2D) is important to reduce the risk of cardiovascular disease (CVD). Many persons do not achieve the treatment targets for T2D, which is important for reducing CVD risk. Healthcare professionals (HCPs) in primary care try to support persons living with T2D to effectively manage their disease, but previous results show that communicating risk can be challenging and that persons living with T2D and HCPs often have different views on CVD risk in diabetes.

Aim

To describe diabetes nurses and physicians' experiences of identifying, communicating, and acting on cardiovascular risk in type 2 diabetes

Method

Data collection consisted of ten individual semi-structured interviews with five diabetes nurses and five physicians working in primary health care. The interviews were analysed according to Grounded Theory.

Result

From the analysis emerged the core category: *“Striving to make the patients involved in their risk management”*, which consists of four categories; Identifying and assessing CVD risk, Adapting the communication to the patient's situations and individual needs, Building a trusting care relationship and being supportive and Having a vision of functional teamwork.

Conclusion

The results show that the HCPs feel a responsibility for the risk information and strive to involve the patients, but they ask for new pedagogical approaches, and development of communicative competence according to the patient's situations and individual needs. The diabetes nurses described that they felt responsible for the risk communication due to the shortage of physicians and ask for a better consensus in the team. The HCPs described the challenge to find a balance between encouraging and demanding to motivate lifestyle changes but also being forced to accept not reaching all patients with their risk communication.